									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD														
Effective October 1, 2003 /0 7-2/98/													/	
CLAIMS AS FILED - PART I									E	YTITY	OTHER THAN			
(Column 1) (Column 2)								TYPE			OR	SMALL		
TOTAL CLAIMS			17		•		.	RATE		FEE]	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC F	ΈE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/2- minus 20=		· 6			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		0			X43=			OR	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT			+14			=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	770		
	CLAIMS AS AMENDED - PART II									_	OTHER			
	 	(Column 1)	(Colu				SMA		L E	NTITY	OR	SMALL		
AMENDMENT A	11/25/3	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 11.7	Minus	# 6	0	-	\dashv	X\$.9=			OR	X\$18=		
AME	Independent	• /	Minus	***	3	-	X43=				OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DE			PENDENT CLAIM				+145=			OR	+290=	1	
									¥.		OR	TOTAL ADDIT. FEE		
		(Column 1)	^	NDDIT. FE	E L		- /	ADUII. FEEI						
		CLAIMS		(Colun	EST	(Column 3)	ſ		7	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	l	TIONAL		RATE	TIONAL FEE	
	Total	•	Minus	**		2		X\$ 9=	1		OR	X\$18=		
	Independent	•	Minus			-	Ī	X43=	1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		OR	+290=		
									Į			TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)										•			
ပ	`	CLAIMS REMAINING		HIGHE	ST		Γ			ADDI-	ſ		ADDI-	
AMENDMENT (AFTER AMENDMENT	·	PREVIO PAID F	USLY	PRESENT EXTRA	١	RATE		TONAL FEE		RATE	TIONAL	
	Total	•	Minus	**		Ξ .	T	X\$ 9=	T		OR	X\$18=		
	Independent	*	Minus	***		= ,	r	X43=	†		أن	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╂		OR			
	I the enter in eather	L	+145=			OR	+290=							
(the entry in colur the "Highest Nur	TOTAL DDIT. FEE	_		OR ,	TOTAL VDDIT. FEE								
		mber Previously Paid ber Previously Paid					foun	d in the a	ppr	opriate box	in col	umn 1.		